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APPLICANTS

Tetsuo Santo, Hamada-Shi, JAPAN;
 Songhua Li, Izumo-Shi, JAPAN;
 Ruwei Wang, Lishushi, CHINA; Sumio Iwasaki, Izumo-Shi, JAPAN;

**** CONTINUING DATA **** *OK ALC*

 This application is a 371 of PCT/JP02/03747 04/15/2004

**** FOREIGN APPLICATIONS **** *none ALC*

**** SMALL ENTITY ****

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 10	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	EXAMINER'S SIGNATURE <i>[Signature]</i>	INITIALS <i>[Initials]</i>		

Verified and Acknowledged

ADDRESS
 23900
 J C PATENTS, INC.
 4 VENTURE, SUITE 250
 IRVINE , CA
 92618

TITLE
 Therapeutic cream for dermatitis

FILING FEE RECEIVED 628	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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